## PILING DATE MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET ATPLICANT(S) (FOR USE WITH FO PTO-875) **CLAIMS** AFTER AS FILED AFTER AFTER AFTER AS FILED IN AMENDMENT 24 AMENDMENT IH AMENDMENT 2nd AMENDMENT IND. DEP. IND. DEP. IND. DEP. IND. DEP. IND. DEP. IND. DEP. <u>3</u>0 TOTAL TOTAL IND. IND. TOTAL DEP.

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TOTAL

**CLUBUS** 

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